

Community Behavioral Health Quality Improvement Measures Specifications Matrix

General Comments and Definitions Applicable to All Community Behavioral Health Quality Improvement Measures

1. The Department will report all of these community behavioral health quality improvement measures quarterly on its web site.
2. Previous 12 months means the latest 12-month period (T2) compared with the 12-month period (T1) ending one quarter earlier.
3. All CCS 3 Consumer Record data elements for these measures are collected at an individual's admission to a program area and must be updated whenever the data change or at least annually and at an individual's discharge from a program area, and they are reported by CSBs monthly to the Department in CCS 3 extracts.
4. All CCS 3 Service Record data elements for these measures are collected when the service is received, preferably daily, and they are reported by CSBs monthly to the Department in CCS 3 extracts.
5. All CCS 3 Type of Care (TOC) data elements for these measures are collected when the events they document occur (e.g., admission to or discharge from a program area or assignment of a consumer designation code).

Mental Health Services Recovery Quality Improvement Measures		CCS 3 Record	CCS 3 Data Element and Use	
Measure	Definition			
1. Assertive Community Treatment Outcomes	Percent of individuals receiving assertive community treatment services (denominator) with stable housing and low psychiatric hospitalizations and no arrests in the previous 12 months (numerator).	NA	NA	NA; instead, data is derived from monthly Assertive Community Treatment reports submitted to the Department by CSBs that operate PACT or ICT teams.
2. Employment Status	Percent of adults with serious mental illness admitted to the mental health services program area who received at least one mental health case management service of any duration in the previous 12 months (denominator) and were employed full- or part-time or received individual or group supported employment at any point in those 12 months (numerator). The numerator does not include individuals receiving sheltered employment services. The unemployment rate (UR) for each CSB is displayed in a column next to the CSB name to provide additional context for this measure. <i>Note: Employment Status is collected only at admission to a program area and case management services are only available in a program area.</i>	Consumer	16	Date of Birth for age
		TOC	3	Program Area ID for admission to the mental health services program area (100)
		Consumer	13.a	SMISEDAtRisk for SMI (code 11)
		Consumer	22	Employment Status for employed full-time (code 01), part-time (code 02), or supported employment (code 12)
		Service	3	Program Area ID for mental health services program area (100)
		Service	5	Service Code for case management (320)
		Service	10	Units for a case management service hour
		Service	48	Service From Date for case management service within the previous 12 months

Community Behavioral Health Quality Improvement Measures Specifications Matrix

Mental Health Services Recovery Quality Improvement Measures		CCS 3 Record	CCS 3 Data Element and Use	
Measure	Definition			
3. Intensity of Engagement by Adults in Community Mental Health Case Management Services	Percent of adults admitted to the mental health services program area during the previous 12 months with serious mental illness who received one hour of case management services within 30 days of admission (denominator) who received at least five additional hours of case management services within 90 days of admission (numerator).	Consumer	16	Date of Birth for age
		TOC	3	Program Area ID for admission to the mental health services program area (100)
		Consumer	13.a	SMISEDAtRisk for SMI (code 11)
		TOC	61	Type of Care From Date for the admission date and within 30 and 90 days of the date
		Service	3	Program Area ID for the mental health services program area (100)
		Service	5	Service Code for case management (320)
		Service	10	Units for case management service hours
		Service	48	Service From Date for service hours within 30 and 90 days of the admission date

Community Mental Health Services Recovery Quality Improvement Measure Definitions and Explanations

1. PACT Outcomes

- a. **Assertive community treatment services** are received in a Program of Assertive Community Treatment (PACT) or in Intensive Community Treatment (ICT).
- b. **Stable housing** means no more than one move and no homelessness or jail as a residence in the previous 12 months.
- c. **Low psychiatric hospitalizations** means no more than one admission to a local psychiatric hospital or unit or a state hospital in the previous 12 months.
- d. **No arrests** means no arrests during the previous 12 months.

2. Employment Status

- a. **Adult** means an individual who is at least 18 and less than 65 years old at some point during the previous 12 months. Age is determined using CCS 3 data element 16 Date of Birth in the Consumer Record.
- b. **Admission to the Mental Health Services Program Area** is denoted in a Type of Care Record with the 100 code for mental health services entered for CCS 3 data element 3 Program Area.
- c. **Serious mental illness (SMI)** is defined on pages 30 and 31 of Core Services Taxonomy 7.2 and is determined using a criteria-based checklist in Appendix A of the Taxonomy (page 34). SMI is reported using code 11 in CCS 3 data element 13.a SMISEDAtRisk in the Consumer Record for individuals at any time in the previous 12 months.

Community Behavioral Health Quality Improvement Measures Specifications Matrix

- d. **Case management services** are defined on page 11 of Core Services Taxonomy 7.2. Case management services are provided by designated case managers who meets the qualifications in the Licensing Regulations (12 VAC 35-105-1250) and are billed and reported as case management services. Case management **activities** that are **integral parts** of other core services, such as day support, employment, or residential services, are not counted or reported in CCS 3 as case management services since those activities are included in the units of service reported for those other core services (i.e., a day support hour, day of service, or bed day). Mental health case management services are reported using CCS 3 data elements in the Service Record: No. 3 Program Area ID for mental health (code 100), No. 5 Service Code (code 320), and No. 10 Units. Since this measure focuses only on individuals who meet the Taxonomy 7.2 criteria for serious mental illness, it is important to include only case management services they receive from designated case managers, rather than including other case management-like activities that are provided as part of other services. CCS 3 data element 48 Service From Date in the Service Record is used to identify receipt of at least one case management service of **any duration** (e.g., it does not have to be a whole hour) within the previous 12 month period.

3. Intensity of Engagement by Adults in Community Mental Health Case Management Services

- a. **Adult** means an individual who is at least 18 and less than 65 years old as of the date of admission to the mental health services program area. Age is determined using CCS 3 data element 16 Date of Birth in the Consumer Record.
- b. **Admission to the Mental Health Services Program Area** is denoted in a Type of Care Record with the 100 code for mental health services entered for CCS 3 data element 3 Program Area. The admission date, entered as CCS 3 data element 61 Type of Care From Date in the Type of Care Record, is used to determine admission during the previous 12 months and to identify the 30 and 90 day periods in the measure.
- c. **Serious mental illness (SMI)** is defined on pages 30 and 31 of Core Services Taxonomy 7.2 and is determined using a criteria-based checklist in Appendix A of the Taxonomy (page 34). SMI is reported using code 11 in CCS 3 data element 13.a SMISEDAtRisk in the Consumer Record for individuals at any time in the previous 12 months.
- d. **Case management services** are defined on page 11 of Core Services Taxonomy 7.2. Case management services are provided by designated case managers who meets the qualifications in the Licensing Regulations (12 VAC 35-105-1250) and are billed and reported as case management services. Case management **activities** that are **integral parts** of other core services, such as day support, employment, or residential services, are not counted or reported in CCS 3 as case management services since those activities are included in the units of service reported for those other core services (i.e., a day support hour, day of service, or bed day). Mental health case management services are reported using CCS 3 data elements in the Service Record: No. 3 Program Area ID for mental health (code 100), No. 5 Service Code (code 320), and No. 10 Units. Since this measure focuses only on individuals who meet the Taxonomy 7.2 criteria for serious mental illness, it is important to include only case management services they receive from designated case managers, rather than including other case management-like activities that are provided as part of other services. CCS 3 data element 48 Service From Date in the Service Record is used to identify receipt of at least one hour of case management services within 30 days of admission to the mental health services program area and at least five additional hours within 90 days of admission. These hours can consist of aggregated fragments of an hour and whole hours. However, given the population in this measure (individuals with serious mental illness), the expectation is that individuals will receive a significant amount of service at one time, rather than small increments (e.g., five minutes) multiple times over the month or 90 days so that case management contacts are substantial and significant.

Community Behavioral Health Quality Improvement Measures Specifications Matrix

Substance Abuse Services Quality Improvement Measures		CCS 3 Record	CCS 3 Data Element and Use	
Measure	Definition			
4. Intensity of Engagement by Adults in Community Substance Abuse Outpatient Services	Percent of adults admitted to the substance abuse services program area during the previous 12 months who received one hour of outpatient services after admission (denominator) who received at least two additional hours of outpatient services within 30 days of admission (numerator).	Consumer	16	Date of Birth for age
		TOC	3	Program Area ID for admission to the substance abuse program area (300)
		TOC	61	Type of Care From Date for admission date and within 30 days of the date
		Service	3	Program Area ID for the substance abuse services program area (300)
		Service	5	Service Code for outpatient services (310)
		Service	10	Units for outpatient service hours
		Service	48	Service From Date for outpatient service hours within 30 days of admission
5. Retention in Community Substance Abuse Services	Percent of all individuals admitted to the substance abuse services program area during the previous 12 months who received at least one valid substance abuse or mental health service of any type, except those services provided in jails or juvenile detention centers, in the month following admission (denominator) who received at least one valid mental health or substance abuse service of any type, except those services provided in jails or juvenile detention centers, every month for at least the following five months (numerator).	TOC	3	Program Area ID for admission to the substance abuse program area (300)
		TOC	61	Type of Care From Date for admission date and six months after that date
		Service	3	Program Area ID for the substance abuse or mental health services program area (300 or 100)
		Service	5	Service Code for any valid mental health or substance abuse services
		Service	48	Service From Dates for services within 30 days of admission and monthly thereafter
		Service	65	Exclude service location codes 04 and 05 (jails and juvenile detention centers)
6. Days Waiting to Enter Community Substance Abuse Treatment	For all individuals admitted to the substance abuse services program area in the previous 12 months, the average number of calendar days from the date of the first contact or request for service to the first scheduled appointment in a substance abuse service accepted by the individual.	TOC	3	Program Area ID for admission to the substance abuse program area (300)
		TOC	61	Type of Care From Date for the admission date
		Consumer	46	Days Waiting to Enter Treatment

Community Substance Abuse Services Quality Improvement Measure Definitions and Explanations

4. Intensity of Engagement by Adults in Community Substance Abuse Outpatient Services

- a. **Adult** means an individual who is at least 18 and less than 65 years old as of the date of admission to the substance abuse services program area. Age is determined using CCS 3 data element 16 Date of Birth in the Consumer Record.

Community Behavioral Health Quality Improvement Measures Specifications Matrix

- b. **Admission to the Substance Abuse Services Program Area** is denoted in a Type of Care Record with the 300 code for substance abuse services entered for CCS 3 data element 3 (Program Area). The admission date, entered as CCS 3 data element 61 Type of Care From Date in the Type of Care Record, is used to determine admission during the previous 12 months and to identify the 30 day period in the measure. If there is more than one admission date during the 12 month period for an individual, each admission date will be examined, and if any date is followed by one hour of outpatient services, the individual will be included in the denominator. If that admission date is followed by two additional hours of outpatient services within 30 days of an admission date, the individual will be included in the numerator. No more than one admission date will be counted for an individual to avoid duplicate counts of individuals. ***Comment:** If an individual is admitted to the substance abuse services program area and receives an assessment in outpatient services but then moves to another service and receives no additional outpatient services, he or she would be included in the denominator but not the numerator; however, this should be a relatively rare occurrence. In FY 2011, out of the 36,769 unduplicated individuals who received any substance abuse service, 77 percent (28,445) received outpatient services.*
- c. **Outpatient services** are defined on pages 9 and 10 of Core Services Taxonomy 7.2. Outpatient services include intensive substance abuse outpatient services but do not include medication assisted treatment (335) or assertive community treatment (350) for purposes of this measure. Substance abuse outpatient services are coded as Program Area 300 and Service Code 310. CCS 3 data element 48 Service From Date in the Service Record is used to identify receipt of the first hour of outpatient services and at least two additional hours of outpatient services within 30 days of admission to the substance abuse services program area.

5. Retention in Community Substance Abuse Services

- a. **Age** is not restricted for this measure; it applies to all individuals admitted to the substance abuse services program area.
- b. **Admission to the Substance Abuse Services Program Area** is denoted in a Type of Care Record with the 300 code for substance abuse services entered for CCS 3 data element 3 Program Area. The admission date, entered as CCS 3 data element 61 Type of Care From Date in the Type of Care Record, is used to determine admission during the previous 12 months and to identify the 30 day and six month periods in the measure. If there is more than one admission date during the 12 month period for an individual, each admission date will be examined, and if any date is followed by receipt of any valid service within 30 days of an admission date, the individual will be included in the denominator. If that date is followed by receipt of any valid service monthly for the following five months, the individual will be included in the numerator. No more than one admission date will be counted for an individual to avoid duplicate counts of individuals.
- c. **Any valid mental health or substance abuse service** is listed in the attached FY 2012 CCS 3 Valid Services Table.

6. Days Waiting to Enter Community Substance Abuse Treatment

- a. **Age** is not restricted for this measure; it applies to all individuals admitted to the substance abuse services program area.
- b. **Admission to the Substance Abuse Services Program Area** is denoted in a Type of Care Record with the 300 code for substance abuse services entered for CCS 3 data element 3 Program Area. The admission date, entered as CCS 3 data element 61 Type of Care From Date in the Type of Care Record, is used to determine admission during the previous 12 months and the date of admission. If there is more than one admission during the 12 month period for an individual, the last date during the 12 month period will be used to collect the days waiting to enter treatment data from the next Consumer Record submission after that date.

Community Behavioral Health Quality Improvement Measures Specifications Matrix

- b. **Days waiting to enter treatment** is defined in CCS 3 data element 46, and the definition and application of it are clarified in CCS 3 Frequently Asked Questions FAQ) No. 2, dated 04-29-2011, issued to assist CSBs in collecting and reporting this data element more consistently. Part of the FAQ text on Days Waiting to Enter Treatment follows.

Days waiting to enter treatment means the number of calendar days from the date of the first contact or request for a **substance abuse treatment service** by the individual or someone acting on behalf of the individual (e.g., a family member, an authorized representative, or another agency such as probation and parole or court services) until the date of the first scheduled appointment for a treatment service that the consumer or an authorized representative acting on behalf of the consumer agrees to accept, which means agreeing to receive or participate in the scheduled service. Treatment service means only those categories and subcategories of core services in Core Services Taxonomy 7.2 that are available after admission to the Substance Abuse Program Area (e.g., Outpatient or Residential Services) but not Services Available Outside of a Program Area (e.g., Emergency or Assessment and Evaluation Services). The first contact or request could be made by telephone or in-person and by the consumer himself or herself or someone acting on behalf of the consumer, including a referring agency, such as probation and parole, if it involved or consulted with the consumer about the date.

Days waiting to enter treatment must be reported as a valid number that is less than 996. The CSB average is calculated using the value for data element 46 in the first Consumer Record submission after the admission date for each individual.

Community Behavioral Health Quality Improvement Measures Specifications Matrix

Community Behavioral Health Quality Improvement Measures Specifications Matrix				
Children's Mental Health Services Quality Improvement Measures		CCS 3 Record	CCS 3 Data Element and Use	
Measure	Definition			
7. Intensity of Engagement by Newly Admitted Children Receiving Community Mental Health Outpatient Services	Percent of children admitted to the mental health services program area during the previous 12 months who received one hour of outpatient services within 30 days of admission (denominator) who received at least two additional hours of outpatient services within 30 days of admission (numerator).	Consumer	16	Date of Birth for age
		TOC	3	Program Area ID for admission to the mental health services program area (100)
		TOC	61	Type of Care From Date for admission date and within 30 days of that date
		Service	3	Program Area ID for mental health services program area (100)
		Service	5	Service Code for outpatient services (310)
		Service	10	Units for outpatient service hours
		Service	48	Service From Date for outpatient service hours within 30 days of admission

Community Children's Community Mental Health Services Quality Improvement Measure Definitions and Explanations

7. Intensity of Engagement by Children in Community Mental Health Outpatient Services

- a. **Child** means an individual who is more than 0 and less than 18 years old as of the date of admission to the mental health services program area. Age is determined using CCS 3 data element 16 Date of Birth in the Consumer Record.
- b. **Admission to the Mental Health Services Program Area** is denoted in a Type of Care Record with the 100 code for mental health services entered for CCS 3 data element 3 Program Area. The admission date, entered as CCS 3 data element 61 Type of Care From Date in the Type of Care Record, is used to determine admission during the previous 12 months and to identify the 30 day period in the measure.
- c. **Outpatient services** are defined on pages 9 and 10 of Core Services Taxonomy 7.2. Outpatient services include intensive in-home services, which are included in outpatient services (310), but do not include assertive community treatment (350) for purposes of this measure. Mental health outpatient services are coded as Program Area 100 and Service Code 310. CCS 3 data element 48 Service From Date in the Service Record is used to identify receipt of the first hour of outpatient services and at least two additional hours of outpatient services within 30 days of admission to the mental health services program area.

Community Behavioral Health Quality Improvement Measures Specifications Matrix

Valid CCS 3 Services Table

This table displays the ProgramAreaId, ServiceCode, core service name, and unit of service for each service that can be reported as a valid service in CCS 3. Services with any other combination of ProgramAreaId and ServiceCode must not be included in a CSB's CCS 3 extract. Services are reported in the Service file with units of service shown in Data Element 10 (D.E. 10). Service files must include a ConsumerId in Data Element 7. When service hours are not received by or associated directly with specific individuals or groups of individuals, then the ConsumerId field must contain a Z-consumer (unidentified individual receiving services) code. A Service file with a Z-consumer code is also known as an NC Service file, NC indicating the absence of an identified consumer. Service hours can be reported in a Service file with a Z-consumer code (NC Service file) for any core service for which the unit of service is a service hour. Services with service units other than service hours must not be reported in NC service files. This is explained in more detail in the CCS 3 Extract Specifications - Version 7 and Core Services Taxonomy 7.2.

Consumer Service Hours (Data Element 56) are not included in the table because they will not be collected for FY 2012 or future fiscal years. Any core service with units reported in Data Element 56 is not a valid service; Data Element 56 must be reported as a NULL value in any Service file.

Substance Abuse Prevention Services are not included in the table because this service data is reported separately through the KIT Prevention System. Infant and Toddler Intervention Services are not included because this service data is provided separately through ITOTS.

Program Area Id	Service Code	Core Service Name	Unit of Service	Service File D.E. 10	NC Service File D.E. 10
Services Available Outside of a Program Area					
400	100	Emergency Services	Service Hour	X	X
400	318	Motivational Treatment Services	Service Hour	X	X
400	390	Consumer Monitoring Services	Service Hour	X	X
400	720	Assessment and Evaluation Services	Service Hour	X	X
400	620	Early Intervention Services	Service Hour	X	X
400	730	Consumer-Run Services	NA	NA	NA
Services Available at Admission to a Program Area					
Inpatient Services					
100	250	Acute Psychiatric Inpatient Services	Bed Day	X	
300	250	Acute Substance Abuse Inpatient Services	Bed Day	X	
300	260	Community-Based Substance Abuse Medical Detoxification Inpatient Services	Bed Day	X	
Outpatient Services					
100	310	Outpatient Services	Service Hour	X	X
200	310	Outpatient Services	Service Hour	X	X
300	310	Outpatient Services	Service Hour	X	X
300	335	Medication Assisted Treatment Services	Service Hour	X	X
100	350	Assertive Community Treatment	Service Hour	X	X
Case Management Services					
100	320	Case Management Services	Service Hour	X	X
200	320	Case Management Services	Service Hour	X	X
300	320	Case Management Services	Service Hour	X	X

Community Behavioral Health Quality Improvement Measures Specifications Matrix

Program Area Id	Service Code	Core Service Name	Unit of Service	Service File D.E. 10	NC Service File D.E. 10
Day Support Services					
100	410	Day Treatment or Partial Hospitalization	DS Hours	X	
300	410	Day Treatment or Partial Hospitalization	DS Hours	X	
100	420	Ambulatory Crisis Stabilization Services	DS Hours	X	
300	420	Ambulatory Crisis Stabilization Services	DS Hours	X	
100	425	Rehabilitation	DS Hours	X	
200	425	Habilitation	DS Hours	X	
300	425	Rehabilitation	DS Hours	X	
Employment Services					
100	430	Sheltered Employment	Days of Serv	X	
200	430	Sheltered Employment	Days of Serv	X	
300	430	Sheltered Employment	Days of Serv	X	
100	465	Group Supported Employment	Days of Serv	X	
200	465	Group Supported Employment	Days of Serv	X	
300	465	Group Supported Employment	Days of Serv	X	
100	460	Individual Supported Employment	Service Hour	X	X
200	460	Individual Supported Employment	Service Hour	X	X
300	460	Individual Supported Employment	Service Hour	X	X
Residential Services					
100	501	Highly Intensive Residential Services	Bed Day	X	
200	501	Highly Intensive Residential Services	Bed Day	X	
300	501	Highly Intensive Residential Services	Bed Day	X	
100	510	Residential Crisis Stabilization Services	Bed Day	X	
300	510	Residential Crisis Stabilization Services	Bed Day	X	
100	521	Intensive Residential Services	Bed Day	X	
200	521	Intensive Residential Services	Bed Day	X	
300	521	Intensive Residential Services	Bed Day	X	
100	551	Supervised Residential Services	Bed Day	X	
200	551	Supervised Residential Services	Bed Day	X	
300	551	Supervised Residential Services	Bed Day	X	
100	581	Supportive Residential Services	Service Hour	X	X
200	581	Supportive Residential Services	Service Hour	X	X
300	581	Supportive Residential Services	Service Hour	X	X
Prevention Services					
100	610	Mental Health Prevention Services	Service Hour	X	X
200	610	Developmental Prevention Services	Service Hour	X	X